Together for Quality

Alabama Medicaid Agency STATUS REPORT May 9, 2007

I. Clinical Workgroup:

The Clinical Workgroup held conference calls on April 11th and April 25th. On April 11th the Clinical Workgroup determined eight diabetes quality indicators to be presented to diabetes domain/content experts in May. Workgroup members identified and made the initial content with these experts. The Clinical Workgroup members were also asked to start thinking about how we would determine the 500 PMP pilot group and to think of ways to encourage provider participation.

A combined Clinical and Technical workgroup call was held on April 25th. Discussion occurred on what the intent of the RFI was and whether the system to be developed was envisioned as being accessed separately or to be integrated into existing EMR systems. The consensus of the group was that this would have to work with systems already existing in providers' offices. The group then discussed the data elements needed which were not disease specific but necessary to capture the information for them to do their jobs better. They were asked to look at the screen prints sent of the InfoSolutions data elements as an example only and were instructed to create a list of all of the data elements they thought were needed and not to look at this based on any disease but in general. The Clinical Workgroup members were told to develop a list of what they would need to and to send this to Dr. McIntyre by **COB May 4**th.

Both workgroups were asked for volunteers to review the RFIs. Dr. Feliciana Yu and Dr. Claude Ouimet volunteered to be reviewers for the Clinical Workgroup and Dr. Jerry Harrison volunteered for Technical. Additional reviewers are needed and volunteers were asked to notify their perspective Agency co-chairs. The meeting dates for the month of May for Clinical are May 9th immediately following the Stakeholder Council (Conference line will be available for those who do not attend the Stakeholder Council Meeting), May 16th 4:00pm Conference Call and May 30th 4:00pm Conference Call.

Next Steps

- Finalize QI indicators for Diabetes and Asthma
- Finalize general data elements from lists provided by workgroup members
- Establish baselines for QI indicators with clarification of numerators and denominators including age, timeframes, etc.
- Following demonstrations from RFI vendors determine functionality and design
- Establish criteria for inclusion/exclusion for the provider pilot group

Report Submitted by Agency Co-chair: Dr. Mary G. McIntyre Additional Co-chairs Drs. Christine Ritchie and John Searcy

II. Technical Workgroup:

As of today, the Technical Workgroup has met all required objectives and milestones in accordance with our assigned list of tasks. The Technical Workgroup has held weekly conference calls to discuss and resolve issues and submitted a list of issues to the Clinical and Policy Workgroup, as well as held a conference call with the Clinical Workgroup to discuss and clarify issues presented to our workgroup by the Clinical Workgroup. Also, the Technical Workgroup submitted a list of policy questions that our workgroup felt that needed to be addressed early in this project.

The Technical Workgroup submitted a middleware Enterprise Service Bus (EBS) on how the Alabama Department of Finance Information Services Division (ISD) Chief Information Officer (CIO) of Alabama see it's role in this project to our workgroup as well as to the Clinical and Policy Workgroup for a decision as we move into reviewing vendors proposals from the RFI.

Technical Workgroup Core RFI Reviewers Team as of today: Terrell Flowers; Lesia Todd-Williams; Dr. Jerry Harrison; Jack Doane; Jeff Bonner

Vendors on the Technical Workgroup have been notified that they will not be allowed to review the submitted RFI proposals.

The Technical Workgroup is awaiting vendor's responses to the RFI so that review and development can start on the RFP/ITB. According to our group, at this time, we do not see a need to refocus or re-prioritize any task. As a Technical Workgroup, our tasks mainly revolve around what the other workgroups dictate in implementing the technical tasks. The Technical Workgroup did submit a list of issues that need to be resolved early in this project. It is vital that the operating business rules for this project be defined and developed by the Clinical Workgroup. The Technical Workgroup's mission is to ensure that what ever the other workgroups business rules require can be implemented from a sound technical standpoint. The Technical Workgroup thinks that the Clinical Workgroup needs to get with or survey the providers based on comments of providers, in developing the screen layout for this project.

The Technical Workgroup emailed their major concerns and is awaiting a response. These concerns surround the level of e-prescribing as presented by members of the Technical Workgroup will be housed in the first phase of this project, lack of a diagram outlining the minimal layout of the project, lack of clearly defined business rules that will drive this system from the other workgroups, State laws involving equipment and software purchasing issues surround this project, private entities usages of State purchased equipment, connectivity to State services and private entities within this short time frame with this level of involvement in implementing this project by March 2008, and the lack of policy information for designing the technical aspects on who will house this project for recurring cost once the grant funds are gone.

Next Steps:

- Awaiting RFI responses to assist with the review
- Assist with the development of the RFP/ITB

Submitted by Agency Co-chair Lee Maddox Community Co-chair Jerry Harrison, MD

III. Policy Workgroup:

The workgroup held its meeting on April 9, 2007. Members approved the charter and operating rules of the Workgroup. The composition and operating rules for the Steering Committee which will serve as the governing body for the grant period were finalized. Most of the discussion centered upon the further development of criteria for selection of the state agency to be part of the initial interoperability of data exchange with Medicaid. Kathy Hall agreed to develop a survey to be sent the other agencies to obtain information pertinent to making a recommendation. Survey results will be reviewed at the May meeting.

Next Steps:

- By June 1, 2007 the Steering Committee members will be appointed.
- By June 1, the criteria for selection of the HHS Agency for interoperability project with Medicaid will be finalized and ready for presentation to the Steering Committee.
- The Workgroup will continue to assist other workgroups as needed by reviewing and/or developing policies.

Report submitted by Kathy Hall, Agency Co chair Community Co-chair: Mike Horsley

IV. Finance Workgroup:

The Finance Workgroup reviewed the Florida financial model for an H.I.E and discussed this during a conference call on April 10. A revised workgroup membership list was sent to all Finance Workgroup members. The list will continue to be updated as necessary. Several members of the Finance Workgroup will be participating in the review of the RFI responses and will assist in preparation of the RFP/ITB. The Medicaid Agency co-chairs of this workgroup continue to meet biweekly with the Medicaid Agency co-chairs of the other workgroups in order to coordinate our activities and to be aware of any issues raised by the other workgroups that might impact our function.

Next Steps:

- Prepare a list of functionalities/H.I.E. features that can be used in the Alabama cost model for Phase 2 of the project. The Florida model as well as other states' models will be used to develop this cost model/business plan.
- Determine the need for a health care market analysis in Alabama by reviewing a toolkit provided by eHI and we will consider including outside resources to assist with its development.

V. Privacy Workgroup:

The Privacy Workgroup met on April 9th and April 19th 2007. We have scheduled a standing meeting at 8:30 a.m. on the third Thursday of every month. We discussed Business Associate and Data Sharing Agreements. It was decided that for the pilot project the existing Medicaid Agency form agreements would be presumed suitable, unless subsequent events show otherwise. There was discussion regarding one of the group's objectives to research existing national and other states' legislation regarding data sharing and confidentiality. The eHI group has recommended that the Medicaid Agency hire outside attorneys to conduct a formal legal and

regulatory review due to the scope of this task and the time constraints of group members. There was also general discussion about the legal aspects of opting out by a patient of the reporting of data through the clinical support tool. The Policy Workgroup has requested guidance on this subject.

Next Steps:

• Further research and discussion regarding opting out by patients and issuance of official guidance to Policy Workgroup.

Report submitted by Agency Co-chair, Bill Butler Additional Co-chairs: Paul Brannan (Agency), David Darby (Community)

VI. Project Milestones:

The Project is on target with all milestones as outlined in the Request for Information (RFI).

Performance report over last period February 1, 2007- April 30, 2007					
Milestone Deliverables	Due Date	% Completed	Deliverable Status		
Outcome I: Develop stakeholder consensus and capacity to maintain a broad base of support for					
Together for Quality implementation to assure long ter Identify champions and key stakeholders for Stakeholder Council; establish membership, form workgroups.	February – March, 2007	100%	On Schedule: All materials posted on website		
Develop operating rules	3/8/07	100%	On Schedule		
Elect Co-chairs	3/8/07	100%	On Schedule		
Create Workgroup Charters and Workplan	February- March, 2007	100%	On Schedule		
Develop consensus, generate vision, mission, and value statements, create an initial framework for the Alabama Roadmap	3/8/07-3/9/07	100%	On Schedule		
Reach consensus on initial governance, technical, privacy, and security policies.	March-June 2007	60%	On Schedule		
Sample survey of AL health information technology use using eHI Organization Assessment Tool (OAT)	March 2007	100%	On Schedule		
Conduct market characteristic assessment using AHIMA FORE worksheet	March 2007	100%	On Schedule		
Develop RFI	February-April 2007	100%	On Schedule		
Outcome II: A data-driven outcomes focused quality impro- selected measure improvement of at least 4 percentage po					
Provide overview for Stakeholder Council of a general understanding of TFQ, Pt 1 st Profiling, InfoSolutions, and ePrescribing capabilities.	3/8/07	100%	On Schedule		
Sample survey of medical home providers to determine value and use of current electronic access to existing data; inform Stakeholder Council Clinical Workgroup of results.	3/8/07	100%	On Schedule: included results in the RFI		
Outcome III: A statewide, shared interoperable health information system will be in place and successfully utilized by the ALMA and at least one other HHS agency by October 2008.					
Establish parameters for agency choice	3/8/07	100%	On Schedule		

Release Request for Information (RFI)	4/2/07	100%	On Schedule: RFI
		1000/	posted on website
Respond to questions with at least weekly post of all Q & A's on the ALMA website	April 2007	100%	On Schedule: Q&As posted on website
Milestone Deliverables scheduled for completion	over next per	iod May 1, 200	7- July 31, 2007
		%	
Milestone Deliverables	Due Date	Completed	Deliverable Status
Outcome I: Develop stakeholder consensus and capaci Together for Quality implementation to assure long term			of support for
Reach consensus on initial governance, technical,	March-June	y. 60%	On Schedule
privacy, and security policies.	2007	00%	On Scriedule
Complete appropriate business associate agreements		70%	On Schedule:
	May 2007	70%	
and other required legal documents among partners			meetings schedule
	4 *1	4 '11 1 1 1	indicates on time.
Outcome II: A data-driven outcomes focused quality im documentation of selected measure improvement of at			
August 2008	loadt 4 pordon	nago ponto no	in the Buseline By
The initial claims-based, electronic health record (EHR)	June 07	70%	On Schedule
database for use by medical home providers will be			
populated by June 2007.			
Medicaid non-pharmacy claims data and laboratory results	2/07-7/07	80%	On Schedule
will be added to the database.			
Explore feasibility of expanding database by importing	5/07	80%	On Schedule
additional lab data from hospitals' labs	, , , ,		
The ALMA quality improvement organizational structure will	6/07	60%	On Schedule
be in place by February 2007; high risk case management			
protocols developed by May 2007 for implementation by			
July 2007			
Evidence based quality measures will be selected by May	5/07	80%	On Schedule
2007	0,0.	0070	on concadio
Baseline data determined	6/07	50%	On Schedule
Algorithms and tools will be created by July 2007	7/07	50%	On Schedule
QI process initiated and results reviewed.	7/07	50%	On Schedule
A 30% ECST saturation of the ALMA medical home	6/07	30%	Behind Schedule:
providers will be obtained by June 2007			Date dependent
			upon RFP Process;
			date will change to
			align with RFP
			dates.
Outcome III: A statewide, shared interoperable health in	formation sys	tem will be in p	I .
successfully utilized by the ALMA and at least one othe	r HHS agency	by October 20	08.
Identify participating HHS agency	< June 07	50%	On Schedule
Recommend HHS agency	< June 07	50%	On Schedule
Review RFI responses	May 2007	10%	On Schedule
Prepare and initiate RFP or ITB process	May 2007	0%	On Schedule

Prepared by Carroll Nason, Project Director for Stakeholder Council update May 9, 2007